

and dignity should be particularly wary of the pernicious influences that sloppy, left-wing attitudes can exert and that may interfere with clear-headed, rational thinking.

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[Dr. Seeman replies:]

To a patient all anxious and nervous

Stated Berger "I don't offer service.

I merely sell aid

If I'm very well paid,

'Cause otherwise you don't deserve this."

"On what do I base my decision?
On my lucid and right-thinking vision.

Hippocrates' oath

And Maimonides, both

I hold in contempt and derision."

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Medical school: Your chance of getting in is better in the US

Having recently submitted my 11th application to study medicine at a particular Ontario school it was with great interest that I read the article by Amy Chouinard (*Can Med Assoc J* 1987; 137: 956-957).

Although the cited ratios of applicants to entrants in Canada and the United States are correct, I feel that they are deceptive. For example, although the ratio for Canada (4.48) provides a crude estimate of one's chances of gaining admission to a Canadian medical school, the regional variations are striking.¹ For applications from students of a particular province to a school in their province the ratios range from 2.23 (at the University of Manito-

ba) to 28.29 (at Queen's University). In fact, ratios for 3 of the nation's 16 medical schools exceed 20 (McMaster, 21.26; Ottawa, 22.14; and Queen's, 28.29); another ratio is just below 20 (Sherbrooke, 19.66).

Moreover, these figures are conservative, since it is advisable for applicants to apply to a school in their province; some medical schools do not even consider out-of-province applicants. For all applications the ratios range from 2.42 (at the University of Manitoba) to 32.69 (at Queen's). In fact, more than two-thirds (11/16) of the schools have ratios at or above the figure of 4.48.

Although these ratios are inflated by the fact that applications rather than applicants are being counted (data on the latter are not available), the striking variations between and within provinces should persist when the number of applicants is considered.

The grass is indeed greener on the other side of the fence at the 49th parallel.

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Reference

1. *Medical School Admission Requirements, 1987-1988. United States and Canada*, 37th ed, Association of American Medical Colleges, Washington, 1987: 338-369

Bill Mustard remembered

It was with a combination of sadness, many fond personal memories and recollection of remarkable professional achievements that I learned of Dr. William (Bill) Mustard's death from a heart attack at age 73 on Dec. 11, 1987, in Naples, Florida. Dr. Mustard was a pioneer in both orthopedic and cardiovascular surgery and made an outstanding contribution to the education of

generations of surgeons in both disciplines.

Bill Mustard was born in Clinton, Ont., and attended the University of Toronto, where he graduated with his medical degree in 1937.

He was a major in the Canadian Army Medical Corps overseas from 1942 to 1945. His contributions to the prevention of blood clotting and the temporary salvage of blood vessels in badly wounded servicemen earned him the award of member of the Order of the British Empire.

At the Hospital for Sick Children, Toronto, where he remained for 29 years, Dr. Mustard developed in 1952 a procedure named after him involving transfer of the iliopsoas muscle to restore function in polio victims whose hips were paralyzed. In 1963 he developed a procedure, also named after him, for correcting transposition of the great blood vessels to and from the heart. For these achievements he won a Gairdner Foundation International Award and was elected an officer of the Order of Canada.

Possessed of a remarkable wit, Dr. Mustard was always a charming companion and a welcome addition to any meeting. He was the author of many publications.

Many in Canada and throughout the world benefited from Dr. Mustard's skills, dedication and compassion. All can be assured that his contributions will be remembered.

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Correction to obituary

Dr. Mauuri A. Thakker, whose obituary appeared in the Jan. 1, 1988, issue of *CMAJ* (138: 78), was a woman. We apologize to Dr. Thakker's brother for our incorrect use of the term "his". — Ed.